



SUGGESTED VACCINATIONS FOR FOREIGN TRAVEL, PART II

No. 26b, 2009

	Grp 1	Grp 2	Grp 3	Grp 4
Central African Rep.	AGX	AGMX	AGMBX	AGMTBrsX
Chad	AgX	AgMX	AgMBX	AgMTBrsX
Chagos Is. (UK)	A	A	AB	ATBrs
Comoro Is.	AX	AX	ABX	ATBrsX
Congo	AGX	AGX	AGBX	AGTBrsX
Dem. Rep. Congo (Zaire)	AgX	AgX	AgBX	AgTBrsX
Djibouti	AX	AX	ABX	ATBrsX
Egypt	A	A	AB	ATBrs
Equatorial Guinea	AGX	AGX	AGBX	AGTBrsX
Eritrea	AX	AMX	AMBX	AMTBrsX
Asmara	A	AM	AMB	AMTBrs
Ethiopia	AGX	AGMX	AGMBX	AGMTBrsX
Adis Abeba	AG	AGM	AGMB	AGMTBrs
Gabon	AGX	AGX	AGBX	AGTBrsX
Gambia	AGX	AGMX	AGMBX	AGMTBrsX
Ghana	AGX	AGMX	AGMBX	AGMTBrsX
Guinea	AGX	AGX	AGBX	AGTBrsX
Guinea-Bissau	AGX	AGX	AGBX	AGTBrsX
Ivory Coast	AGX	AGMX	AGMBX	AGMTBrsX
Kenya	AGX	AGX	AGBX	AGTBrsX
Nairobi	AG	AG	AGB	AGTBrs
Lesotho	A	A	AB	ATBrs
Liberia	AGX	AGX	AGBX	AGTBrsX
Libya	A	A	AB	ATB
Madagascar	AX	AX	ABX	ATBrsX
Malawi	AX	AX	ABX	ATBrsX
Mali	AgX	AgMX	AgMBX	AgMTBrsX
Mauretania	Agx	Agx	AgBx	AgTBrsX
Mauritius	A	A	AB	ATBs
Mayotte Is. (FR)	AX	AX	ABX	ATBrsX
Morocco	A	A	AB	ATBrs
Mozambique	AX	AX	ABX	ATBrsX
Namibia	A	Ax	ABx	ATBrsX
Niger	AgX	AgMX	AgMBX	AgMTBrsX
Nigeria	AGX	AGMX	AGMBX	AGMTBrsX
Réunion (FR)	A	A	AB	ATBrs
Rwanda	AGX	AGX	AGBX	AGTBrsX
Sao Tomé/Principe	AGX	AGX	AGBX	AGTBrsX
Senegal	AGX	AGMX	AGMBX	AGMTBrsX
Seychelles	A	A	AB	ATBs
Sierra Leone	AGX	AGX	AGBX	AGTBrsX
Somalia	AgX	AgX	AgBX	AgTBrsX
Sudan	AgX	AgMX	AgMBX	AgMTBrsX
Swaziland	Ax	Ax	ABx	ATBrsX
South African Rep.	A	Ax	ABx	ATBrsX
Tanzania	AGX	AGX	AGBX	AGTBrsX
Togo	AGX	AGMX	AGMBX	AGMTBrsX
Tunisia	A	A	AB	ATBrs
Uganda	AGX	AGMX	AGMBX	AGMTBrsX
Zambia	AX	AX	ABX	ATBrsX
Zimbabwe	AX	AX	ABX	ATBrsX
Harare, Bulawayo	A	A	AB	ATBrs

ASIA:

Afghanistan	A	A(T)x ⁵ ₁₁	ATBx ⁵ ₁₁	ATBrsx ⁵ ₁₁
Armenia	A	Av ⁶ ₁₀	Abv ⁶ ₁₀	ATBrsv ⁶ ₁₀
Azerbaijan	A	Aq ⁶ ₁₀	Abq ⁶ ₁₀	ATBrsq ⁶ ₁₀

A: Hepatitis A
B: Hepatitis B
f: SSME/TBE

j: Japanese encephalitis
M: Meningococcus A+C
M*: Meningococcus A+C+W135+Y

s: Tuberculosis
T: Typhoid fever
(T): Typhoid fever >2 weeks

g/G: Yellow fever

r: Rabies

v: Mosquito bite prophylaxis

Q: Chloroquine
U: Chloroquine + proguanil
X: Mefloquine/Malarone/doxycycline
Z: Doxycycline/Malarone

Cholera vaccination

Cholera vaccination is not recommended for ordinary tourists. Vaccination may be relevant in connection with stays in areas with cholera outbreaks. The protection against ordinary travel diarrhoea provided by the cholera vaccine is so limited that the vaccine is not recommended for this indication.

Special regulatory requirements

Some countries require yellow fever vaccination of all travellers, see www.who.int/ith. Stays/transit in countries where yellow fever may occur can result in a vaccination requirement at a later stage of the journey (yellow fever transmission zone). Meningococcal vaccination against group A + C + W135 + Y is required for pilgrimage to Saudi Arabia, a recommendation incl. children from 3 months of age, EPI-NEWS 48/07.

Malaria prophylaxis

Primary mosquito bite prophylaxis using balm/net/spray is always important in malaria areas. Five different pharmacological prophylaxis regimes are listed below:

Chloroquine should only be used in areas with a low *P. falciparum* risk and high sensitivity to chloroquine. May be used by pregnant women and children. May be administered concomitantly with **proguanil** in areas with a high risk of falciparum malaria and reduced chloroquine sensitivity. This pharmaceutical may be used during pregnancy and due to extensive resistance, this combination is rarely recommended to other patient groups.

Mefloquine is efficacious against *P. falciparum* in Africa, but not in all areas of Southeast Asia. According to the WHO, mefloquine may be used for second and third trimester prophylaxis. Mefloquine should not be used prophylactically in children under 3 months of age or children weighing less than 5 kgs, or by patients with epilepsy or previous neuropsychiatric illness or by persons practicing diving. Mefloquine should be initiated 3 weeks prior to departure.

	Grp 1	Grp 2	Grp 3	Grp 4
Bahrain	A	A	AB	ATBs
Bangladesh	A_v	A(T)x	Aj⁷₁₂TBrx	Aj⁷₁₂TBrsx
Dhaka	A	A(T)	Aj ⁷ ₁₂ TBr	Aj ⁷ ₁₂ TBrs
Bhutan	A	A(T)x	Aj ⁶ ₁ TBrx	Aj ⁶ ₁ TBrsx
Brunei	A	A	AjB	AjTBs
Cambodia	A_v	AZ	Aj⁵₁₀BrZ	Aj⁵₁₀TBrsZ
Angor Vat, Tonle Sap	A	AV	Aj⁵₁₀BrV	Aj⁵₁₀TBrsV
China, north of latitude 25°	A	v	Aj ⁵ ₉ B	Aj ⁵ ₉ TBrs
China, south of latitude 25°	A	Aq	Aj⁴₁₀Bq	Aj⁴₁₀TBrsq
Hainan, Yunnan	Ax	Ax	Aj⁴₁₀Bx	Aj⁴₁₀TBrsx
Hong Kong	A	A	AB	ATBs
Macau, Port of	A	A	AB	ATB
East Timor	AX	AX	AjBX	AjTBrsX
Georgia	A v⁷₁₀	A_v⁷₁₀	ABv⁷₁₀	ATBrsv⁷₁₀
India, north	A_v	A(T)u	Aj⁷₁₂TBru	Aj⁷₁₂TBrsu
Assam, Orissa	AV	A(T)X	Aj⁷₁₂TBrX	Aj⁷₁₂TBrsX
India, south	A_v	A(T)u	AjTBru	AjTBrsu
Goa	AV	A(T)X	AjTBrX	AjTBrsX
Indonesia	A	Ax	AjBx	AjTBrsx
Bali, Java (tourist areas)	A	A	AjB	AjTBs
Irian Jaya	AX	AX	AjBX	AjTBsx
Iran	A_v⁵₁₁	ATq⁵₁₁	ATBq⁵₁₁	ATBrsq⁵₁₁
Iraq	A	Ax³₁₁	ABx³₁₁	ATBrsx³₁₁
Israel	A	A	AB	ATBr
Japan			j ⁴ ₁₀	j ⁴ ₁₀ B
Jordan	A	A	AB	ATBr
Kazakstan	A	A	AB	ATBrs
Kirgizia	A	A_v⁶₁₀	ABv⁶₁₀	ATBrsv⁶₁₀
Kuwait	A	A	AB	ATBs
Laos	A_v	AX	Aj⁵₁₀BX	Aj⁵₁₀TBrsX
Vientiane	A	A	Aj ⁵ ₁₀ B	Aj ⁵ ₁₀ TBrs
Lebanon	A	A	AB	ATBr
Malaysia, including	A	Ax	AjBx	AjTBrsx
Sabah & Sarawak	A	Ax	AjBx	AjTBsx
Maldives	A	A	AB	ATBs
Mongolian Rep.	A	A	AB	ATBrs
Myanmar (Burma)	A	AZ	Aj⁵₁₀BrZ	Aj⁵₁₀TBrsZ
Nepal	A	A(T)u	Aj⁷₁₂TBru	Aj⁷₁₂TBrsu
North Korea	A	A_v	Aj⁵₁₀Bv	Aj⁵₁₀TBrsv
Oman	A	A	AB	ATBr
Pakistan	AX	A(T)X	Aj⁶₁TBrX	Aj⁶₁TBrsX
Philippines	A	Ax	AjBx	AjTBrsx
Qatar	A	A	AB	ATB
Saudi Arabia	A	Ax	ABx	ATBsx
Mecca (Hajj)	AM*	AM*	AM*B	AM*TBs
Singapore	A	A	AB	ATBs
Sri Lanka	A	A(T)u	AjTBru	AjTBrsu
South Korea	A	A_v	Aj⁷₁₀Bv	Aj⁷₁₀Bsv
Syria	A	A	AB	ATBrs
Taiwan	A	A	Aj ⁴ ₁₀ B	Aj ⁴ ₁₀ TBs
Tajikistan	A	Au⁶₁₀	ABu⁶₁₀	ATBrsu⁶₁₀
Thailand	A	Az	Aj⁵₁₀Brz	Aj⁵₁₀TBrsz
standard tourist areas	A	Av	Aj⁵₁₀Brv	Aj⁵₁₀TBrsv
Turkmenistan	A	A	AB	ATBrs
United Arab Emirates	A	A	AB	ATBr
Uzbekistan	A	A_v	ABv	ATBrsv
Vietnam	A	Az	Aj⁵₁₀Bz	Aj⁵₁₀TBrsz
Yemen	A_v	Ax	ABx	ATBrsx

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V: Mosquito bite prophylaxis

Malarone is efficacious against P. falciparum. Resistance is very rare. Malarone should not be used in pregnant women and is not recommended for breastfeeding mothers, EPI-NEWS 19-20/02.

Child prophylaxis, EPI-NEWS 19/05.

Doxycycline is efficacious against P. falciparum. Doxycycline is contraindicated in pregnant women and children < 12 years, EPI-NEWS 19/05.

Malaria self-treatment

In general, self-treatment cannot replace medical prophylaxis or specific diagnostics. Whenever possible, malaria patients should be examined by a physician and a blood smear microscopy should be performed before malaria treatment is initiated. When staying in remote malaria areas with more than 24-48 hours to the nearest medical service, travellers should be supplied with malaria medication for self-treatment to supplement prophylactic measures. An agent not included in the prophylactic regimen should be chosen:

If mefloquine, doxycycline or chloroquine have been used, possibly in combination with proguanil, Malarone is recommended (adults: 4 tablets daily for three days). If Malarone has been used, mefloquine is used for self-treatment (adults: 3 tablets as a single dose, followed by a single tablet 6-8 hours later).

Travel medicine on the Internet

Current information on outbreaks and detailed information on individual countries and diseases are available at:

www.um.dk
www.who.int/ith
www.cdc.gov/travel
www.promedmail.org
(M. Buhl, Danish Society of Travel Medicine, S. Thybo, Danish Inf. Dis. Soc., J. Kurtzhals, Danish Soc. for Clin. Microbiology; N. E. Møller, Danish College of GPs, L. S. Vestergaard, Danish Society for Tropical Med & Int Health; K. Gade, Danish Paediatric Society, S. Glismann, P.H. Andersen, Dept. of Epid.)

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